

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048419

Entity Name: E4, LLC

FILED  
Apr 25, 2011  
Secretary of State

**Current Principal Place of Business:**

6176 HALF MOON DRIVE  
PORT ORANGE, FL 32127 US

**New Principal Place of Business:**

**Current Mailing Address:**

6176 HALF MOON DRIVE  
PORT ORANGE, FL 32127 US

**New Mailing Address:**

FEI Number: 20-1298588

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FRIEBIS, DANIEL S  
3890 TURTLE CREEK DRIVE  
SUITE B  
PORT ORANGE, FL 32127 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LAYMAN, STUART J  
Address: 6176 HALF MOON DRIVE  
City-St-Zip: PORT ORANGE, FL 32127 US

Title: MGR  
Name: LAYMAN, MARY E  
Address: 6176 HALF MOON DRIVE  
City-St-Zip: PORT ORANGE, FL 32127 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARY E. LAYMAN

MGR

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date